

<b>Effective on 12/09/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2009</h3>		<b>Complete If Known</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/667,931-Conf. #1625</td> </tr> <tr> <td>Filing Date</td> <td>September 22, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Poh K. Hui</td> </tr> <tr> <td>Examiner Name</td> <td>G. S. Kishore</td> </tr> <tr> <td>Art Unit</td> <td>1612</td> </tr> <tr> <td>Attorney Docket No.</td> <td>N0469.70022US02</td> </tr> </table>		Application Number	10/667,931-Conf. #1625	Filing Date	September 22, 2003	First Named Inventor	Poh K. Hui	Examiner Name	G. S. Kishore	Art Unit	1612	Attorney Docket No.	N0469.70022US02
Application Number	10/667,931-Conf. #1625														
Filing Date	September 22, 2003														
First Named Inventor	Poh K. Hui														
Examiner Name	G. S. Kishore														
Art Unit	1612														
Attorney Docket No.	N0469.70022US02														
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
TOTAL AMOUNT OF PAYMENT	(\$)	180.00													

<b>METHOD OF PAYMENT (check all that apply)</b>			
<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____			
<input type="checkbox"/> Deposit Account	Deposit Account Number	23/2825	Deposit Account Name: Wolf, Greenfield & Sacks, P.C.
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)			
<input type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments	

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
	<b>Small Entity</b>		<b>Small Entity</b>		<b>Small Entity</b>		
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
						<b>Small Entity</b>	
						<b>Fee (\$)</b>	<b>Fee (\$)</b>
Each claim over 20 (including Reissues)						52	26
Each independent claim over 3 (including Reissues)						220	110
Multiple dependent claims						390	195
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>			
- 106 or	x	=		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>		
HP = highest number of total claims paid for, if greater than 20.							
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>				
- 6 or HP =	x	=					
HP = highest number of Independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
- 100 =	/50 =	(round up to a whole number) x	=				
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							<b>Fees Paid (\$)</b>
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement						180.00	

<b>SUBMITTED BY</b>			
Signature	/Maria A. Trevisan/	Registration No. (Attorney/Agent)	48,207
Name (Print/Type)	Maria A. Trevisan	Telephone	617.646.8000
		Date	August 15, 2011

<b>Certificate of Electronic Filing Under 37 CFR 1.8</b>	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).	
Date: August 15, 2011	Signature: /Sara J. L. Douglas/ (Sara J. L. Douglas)